

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number:

Monique Ellington

07 CR 0846

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Monique Ellington

FILED

Dec 18 2007

**MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT**

| | |
|--|---|
| NAME (Type or print) <i>Camille Hicks</i> | |
| SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ <i>Camille Hicks</i> | |
| FIRM <i>Camille Hicks & Assoc. LTD.</i> | |
| STREET ADDRESS <i>4747 Lincoln Mall Dr. Ste 410</i> | |
| CITY/STATE/ZIP <i>Matteson, IL 60443</i> | |
| ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) | TELEPHONE NUMBER <i>(708) 283-9270</i> |
| ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | |
| ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | |
| ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | |
| IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | |
| IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input checked="" type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/> | |